

RIVERS IN WW1 – A NEW CHALLENGE

Henry Head was not idle after Rivers' visit. Long acquaintance told him that his friend was ill and he concluded that the problem lay with Craiglockhart. Rivers was isolated there, away from friends with whom he might discuss his theories or who might distract him from his worries. He was tired and strained. More confident in some ways, yes, but full of self-doubt in others. Head quickly settled on a solution; the doctor needed a new challenge, and he had just the job in mind – literally

The Royal Flying Corps and Royal Naval Air Service had both, of course, endured casualties since the start of the war but now their role was changing from reconnaissance to fighter/bomber, they were beginning to suffer more psychological patients, plus the men who were being sent up in observation balloons so that the planes could be directed to targets were feeling the change most. A Consultant Psychologist was needed at their hospital at Hampstead Heath – Not just any psychologist; one who could think quickly, was able to form intelligent analyses from his findings and, above all, was willing to take a few risks: In the course of his work, the man would be required to fly with traumatised pilots. Rivers, Head decided, was just right. The difficult part would be persuading him to leave his current post.

Rivers was, indeed, reluctant. His loyalties lay with his charges and Major Bryce whom he felt he must support in his continuing battle with the authorities but Head was persistent. In the end, the Doctor gave in, but with the stipulation that he would see each of his patients through to the end of their treatment. This was agreed to and Rivers did not start until every one of them had gone through their medical board. Theoretically, his new position was not that different. He would be meeting shell-shocked combatants, discussing their symptoms and helping them to recover the only differences were that he would be able to leave the hospital each day and spend some time assisting Head who was working at the Empire Hospital (for Injuries to the Nervous System) , investigating and treating the effects of wounds to the nervous system and brain, and attending his own patients there. It is not documented whether Rivers found this new regime to be helpful but one must assume that it was and that he began to recuperate at least to an extent from his own trauma.



We do know that the work he accomplished with the RFC/RNAS was valuable – portions of it are still relevant today, and phrases he brought into popular usage (Pat Barker, *Regeneration*), such as ‘wind up’ or ‘losing the horizon’ are well known flying terms. Anne E. Tournay in her book ‘Hostage’ describes how Rivers also answered the questions that had been plaguing the hospital: why was the RFC man’s symptoms different to the soldiers’ and why were Observation Balloonist’s worse than the pilots’?

The first question, for a doctor like Rivers, was probably the simplest to answer. He analysed those men of RFC crews he knew or had treated and came to the conclusion that the answer lay in the nature and role of each person. As Tournay recounts, RFC pilots tended to come from the same class as the old time cavalry; people who were not inured to a great deal of discipline but who could afford their own ‘ride’ and equipment – thus they were men of ‘independent spirit’ who were used to making their own decisions rather than being ordered around without regard to their own opinion. The pilot would not be tied to rigid rules, he would not be trained to blindly follow a particular pattern when challenged but could put into play his own skills and judgement. To put it bluntly, Rivers had long believed that powerlessness to control one’s own fate, or to obey the natural human reaction to the flight-or-fight instinct made people more susceptible to shellshock. He had noticed this with soldiers from the trenches. The RFC man, on the other hand, was permitted a much greater degree of influence over what happened to him. He could retreat when he wished, attack when it seemed wise, sneak or charge at his own discretion. Even Officers in the ground war did not have this much discretion as to their own wishes.

The pilots’ trauma, therefore came from a rather more physical angle; lack of oxygen at higher air levels caused the man to become disoriented, the regulation against parachutes being issued caused obvious concern. The largest proportion of men were haunted by another fear; being trapped in the cockpit of a damaged plane and burnt to death when its fuel canisters erupted. Some pilots readily admitted to carrying a loaded revolver just in case of this eventuality, others were enraged by the fact the German’s were allowed better safety equipment

The experience of the Observation Balloon men Rivers encountered were very much more in keeping with that of infantry troops. They had virtually no say in their own mortality. Many hundred’s of feet up, they were exposed to enemy aircraft and the longer range artillery weapon and, should they receive fire, they suffered even less chance than the average private on the ground to dodge or evade damage. Sitting daily in a wicker basket, under fire with a pair of binoculars, no parachute and no protection would be enough to shred the nerves of the bravest airmen.